• C	Case 4:08-cy-02690-CW Document 12	Filed 08/18/20	08 Page 1 of 6	
1			MOLLY C. DWYER, CLERK U.S. COURT OF APPEALS	
2	En.		AUG 1 8 2008	
3		En	I File	
4	AUG 18 NORTHER UPO W W	2000 N	DATE INITIAL	
5	NORTHERN US OUT W	EKING		
6	OAK LAND	COURT ALIFORNIA		
7		**4/4		
8	UNITED STATES			
9	NORTHERN DISTR	ICI OF CALIFO	KNIA	
10				
11	Plaintiff,	CASE NO	C-08-02690 CW	
12	vs.	PRISONER APPLICAT	'S ION TO PROCEED	
13		IN FORMA		
14	Defendant.			
15	Charat alread Con 5000			
16			f perjury that I am the	
17	plaintiff in the above entitled case and that the		 .	
18	is true and correct. I offer this application in so			
19	required to prepay the full amount of fees, cost			
20	poverty I am unable to pay the costs of this act	ion or give security	, and that I believe that I am	
21	entitled to relief.			
22	In support of this application, I provide		rmation:	
23 24	1. Are you presently employed? Yes			
25	If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:			
26	Gross: Ne	$n \ln n$		
27	Employer: $\frac{1}{\sqrt{A}}$	·· - 1 · 1 · 1 · · · ·		
28	7			

1	If the answer is "no," state the date of last employment and the amount of the gross and net							
2	salary and wages per month which you received. (If you are imprisoned, specify the last							
3	place of employment prior to imprisonment.)							
4	CEO. California Employement Opportunit							
5	San Leandro California, went out of Busin							
6	and I don't have the other needed information							
7	2. Have you received, within the past twelve (12) months, any money from any of the							
8	following sources:							
9	a. Business, Profession or Yes No Self employment							
10	self employment							
11	b. Income from stocks, bonds, Yes No							
12	or royalties?							
13	c. Rent payments? Yes No							
14	d. Pensions, annuities, or Yes No							
15	life insurance payments?							
16	e. Federal or State welfare payments, Yes No							
17	Social Security or other govern-							
18	ment source?							
19	If the answer is "yes" to any of the above, describe each source of money and state the amount							
20	received from each.							
21	1/4							
22	11/4							
23	3. Are you married? Yes No							
24	Spouse's Full Name: 1/1/0							
25	Spouse's Place of Employment:							
26.	Spouse's Monthly Salary, Wages or Income:							
27	Gross \$ 1/9 Net \$ 1/9							
28	4. a. List amount you contribute to your spouse's support:\$							
I)								

1	b. List the persons other than your spouse who are dependent upon you for
2	support and indicate how much you contribute toward their support. (NOTE:
3	For minor children, list only their initials and ages. DO NOT INCLUDE
4	THEIR NAMES.).
5	11/4
6	11/0
7	5. Do you own or are you buying a home? Yes No
8	Estimated Market Value: \$ \(\begin{aligned} \lambda \lambda \text{ Amount of Mortgage: \$ \\ \lambda \end{aligned} \)
9	6. Do you own an automobile? Yes No
10	Make N / U Year N / U Model N / U
11	Is it financed? Yes No \(\sum_{\mathcal{Q}} \) If so, Total due: \(\sum_{\mathcal{Q}} \)
12	Monthly Payment: \$
13	7. Do you have a bank account? Yes No (Do not include account numbers.)
14	Name(s) and address(es) of bank: 1/0
15	·
16	Present balance(s): \$ \(\begin{align*} alig
17	Do you own any cash? Yes No Amount: \$/
18	Do you have any other assets? (If "yes," provide a description of each asset and its estimated
19	market value.) Yes No
20	
21	8. What are your monthly expenses?
22	Rent: \$ $\frac{N/Q}{}$ Utilities: $\frac{N/Q}{}$
23	Food: \$ Clothing:
24	Charge Accounts:
25	Name of Account Monthly Payment Total Owed on This Acct.
26	<u> </u>
27	<u>N/9</u> s <u>N/9</u> s <u>N/9</u>
28	M/9 s N/9 s N/9

1	9. Do you have any other debts? (List current obligations, indicating amounts and to				
2	whom they are payable. Do not include account numbers.)				
3	- N/a				
4	N/a				
5	10. Does the complaint which you are seeking to file raise claims that have been presented				
6	in other lawsuits? Yes No/ N/Q				
7	Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in				
8	which they were filed.				
9					
10	$\frac{N}{q}$				
11	I consent to prison officials withdrawing from my trust account and paying to the court				
12	the initial partial filing fee and all installment payments required by the court.				
13	I declare under the penalty of perjury that the foregoing is true and correct and				
14	understand that a false statement herein may result in the dismissal of my claims.				
15	77708 01 +1 10 11				
16	1.22.08 Christopher Lee Crowford				
17	DATE SIGNATURE OF APPLICANT (
18					
19					
20					
21					
22					

PRIS. APP. TO PROC. IN FORMA PAUPERIS

i	
. 1	
2	Case Number: <u>C-08-02690</u> C4
3	
4	
5	
6	
7	
8	CERTIFICATE OF FUNDS
9	IN
10	PRISONER'S ACCOUNT
11	
12	I certify that attached hereto is a true and correct copy of the prisoner's trust account
13	statement showing transactions of Annyland Unistables for the last six months
14	Gera Valley State Grana [prisoner name] where (s)he is confined.
15	I further certify that the average deposits each month to this prisoner's account for the
16	most recent 6-month period were \$ and the average balance in the prisoner's
17	account each month for the most recent 6-month period was \$
18	
19	Dated: 8408 Scrugger Rect Sech
20	[Authorized officer of the institution]
21	
22	
23	
24	
25	
26	
27	
28	

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REPORT ID: TS3030 .701

REPORT DATE: 07/24/08

PAGE NO:

CALIFORNIA DEPARTMENT OF CORRECTIONS

KERN VALLEY STATE PRISON

INMATE TRUST ACCOUNTING SYSTEM

INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JAN. 01, 2008 THRU JUL. 24, 2008

ACCOUNT NUMBER : V98835

BED/CELL NUMBER: ASU20000000128U

ACCOUNT NAME : CRAWFORD, CHRISTOPHER

ACCOUNT TYPE: I

PRIVILEGE GROUP: B

TRUST ACCOUNT ACTIVITY

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

TRUST ACCOUNT SUMMARY

BEGINNING	TOTAL	TOTAL	CURRENT	HOLDS	TRANSACTIONS TO BE POSTED
BALANCE	DEPOSITS	WITHDRAWALS	BALANCE	BALANCE	
0.00	0.00	0.00	0.00	0.00	0.00

CURRENT AVAILABLE BALANCE 0.00 -----

THE WITHIN INSTRUMENT IS A CORRECT COPY OF THE TRUST ACCOUNT MAINTAINED BY THIS OFFICE. ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION



Christopher LeeCnaw Ford 148835 Kern Valley State Prison P.O. Box 5101. Delanosca 93216 (...lork 11.

Clerk U.S. CourtoFADeals For the Ninth Circuit Po Box 193939 341133335 AFF WHO IS CHICUM (COMMING) AND 13939

